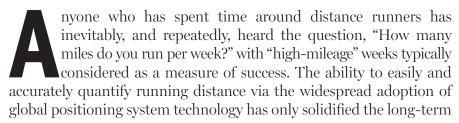
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Moving Beyond Weekly "Distance": Optimizing Quantification of Training Load in Runners

"How do they know the load limits on bridges? They drive bigger and bigger trucks over until it breaks, then they weigh the last truck and rebuild the bridge."

- Bill Watterson, Calvin and Hobbes



- BACKGROUND: Quantifying total running distance is valuable, as it comprises some aspects of the mechanical/neuromuscular, cardiovascular, and perceptual/psychological loads that contribute to training stress and is partially predictive of distancerunning success. However, running distance is only one aspect contributing to training stress.
- CLINICAL QUESTION: The purpose of this commentary is to highlight (1) problems with only using running distance to quantify running training and training stress, (2) the importance of alternative approaches to quantify and monitor training stress, (3) moderating factors (effect-measure modifiers) of training loads, and (4) the challenges of monitoring training stress to assess injury risks.
- KEY RESULTS: Training stress is influenced by external (ie, application of mechanical load) and internal (ie, physiological/psychological effort) training load factors. In running, some commonly used external load factors include volume and pace, while physiological internal load factors
- include session rating of perceived exertion, heart rate, or blood lactate level. Running distance alone might vastly obscure the cumulative training stress on different training days and, ultimately, misrepresent overall training stress. With emerging and novel wearable technology that quantifies external load metrics beyond volume or pace, the future of training monitoring should have an ever-increasing emphasis on biomechanical external load metrics, coupled with internal (ie, physiological/psychological) load metrics.
- CLINICAL APPLICATION: It may be difficult to change the running culture's obsession with weekly distance, but advanced and emerging methods to quantify running training discussed in this commentary will, with research confirmation, improve training monitoring and injury risk stratification. J Orthop Sports Phys Ther 2020;50(10):564-569. Epub 1 Aug 2020. doi:10.2519/jospt.2020.9533
- KEY WORDS: adaptations, biomechanics, monitoring, physiology, runners

"mileage love affair" of runners and coaches. Running distance is typically the only collected training metric. Quantifying total running distance is valuable, as it comprises

some aspects of the mechanical/neuromuscular, cardiovascular, and perceptual/psychological loads that contribute to training stress and is partially predictive of distance-running success.^{8,40} However, running distance is only one aspect contributing to training stress. In this commentary, we aim to address 4 issues:

- Why solely relying on running distance to quantify running training load is a problem
- 2. Alternative approaches to quantifying and monitoring training load
- 3. Moderating factors (effect-measure modifiers) of training load
- 4. The challenge for coaches, clinicians, and runners of how best to monitor training load and its implications for performance and injury risk

Why Relying on Distance Alone to Quantify and Monitor Training in Runners Is a Problem

Runners and coaches have historically only relied on weekly distance to quantify and monitor running training. However, it is increasingly evident that running distance should not be the sole training metric, as it can often misrepresent

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and significantly underestimate training stress and resulting adaptation, and other critical factors contributing to the overall training stress in other endurance sports are rarely considered in runners.33,39 In any sport, training stress2,7,19 is influenced by both external (ie, application of mechanical load) and internal (ie, physiological/psychological responses to the external load) load factors.23 Unfortunately, many training-related terms are poorly defined and/or used inappropriately in the lay and scientific literature alike. Therefore, TABLE 1 provides definitions of training-related terms used throughout this commentary.

In running, some commonly used external load factors include volume, in distance or minutes, and pace, while internal load factors include session rating of perceived exertion (sRPE), heart rate, or blood lactate level. Here it is important to differentiate the term "internal physiological load," which is more common in applied sport sciences and physiology, from "internal tissue (or mechanical) load," which is more commonly used by biomechanists and physical therapists (eg, force, stress, strain, and stiffness). For example, the same 10 km of running distance can result in approximately 14% more foot strikes per

session and approximately 6% greater accumulated peak vertical ground reaction forces when fatigued versus fresh (TABLE 2). This increase in external load, despite the same running distance, and on a day when the runner/coach might actually be seeking lower training stress, can accumulate into real differences in the training stress experienced by the runner.33 Similarly, prescribing a workout based solely on running pace, for example, 4:30 min/km, can also be a misleading measure of training stress, as individual variability, based primarily on sRPE or fatigue, can result in (1) different internal load responses and (2) variable training stress and long-term training adaptations.33 Furthermore, it appears difficult to estimate the external load to the lower limbs per kilometer from distance and pace alone.22 Accordingly, more and more coaches purposely program training volume in minutes (duration) rather than distance, and use internal load metrics (eg, sRPE) to better quantify training stress.37

TABLE 1 DEFINITIONS OF VARIOUS METRICS USED TO QUANTIFY RUNNING TRAINING

Metric	Definition	Example	Unit
Training stress ^{3,9,20}	General term to describe physiological stress result- ing directly from training sessions	External load, physiological internal load, tissue internal load, and workloads	See below
Daily stress	General term to describe physi- ological/psychological stress resulting from nontraining factors	Work, family/relationships, sleep, and financial stress	Visual analog scales and questionnaires
External load ²⁵	Global term used to define the mechanical physical stresses applied to an athlete	 Duration Distance Pace Ground reaction forces Contact time Peak tibial or sacral acceleration Number of steps Other biomechanical variables 	 Minutes Miles or kilometers Minutes per mile or per kilometer Newtons per body weight Seconds Units of gravity Steps Varies
Physiological internal load ^{17,18,25}	Global term used to define the physiological and psychological stresses in response to external loads and daily stress	 Perceived exertion (sRPE) Heart rate Heart rate variability Blood lactate Other physiological variables 	 Scales: 6-20 or 0-10 Beats per minute Variability in interbeat time interval Millimole Varies
Tissue internal load	Global term used to define internal loads placed on musculoskeletal tissue in response to external loads	StressStrainForceStiffnessYoung's modulus	PascalsUnitlessNewtonsN/deformation (mm)
Training load ¹⁸	Specific term defined as the product of external and physiological internal loads	 Duration × sRPE Peak tibial acceleration × sRPE Number of steps × sRPE 	Arbitrary units for all

Abbreviation: sRPE, session rating of perceived exertion.

Alternative Approaches to Quantify Training Load in Runners

Over the last few decades, the combination of sRPE and training volume (duration) has provided alternative approaches to quantify training stress in athletes. Training impulse¹⁵⁻¹⁷ and training load,¹⁶ which both incorporate sRPE (typically on a visual analog scale of 0-10) and session duration, are most commonly used to quantify training stress in athletes.^{17,25,37} More recently, the term "training load" has been used in coaching and sports science literature to generally describe the combination of various external and internal physiological loads of training sessions.

One of the major limitations of measuring external training load is that it fails to account for how runners feel during a given training session, which is not only influenced by the external load of the training session but also by the runner's state of recovery and daily stress (eg, sleep, illness, relationships, etc).^{30,37}

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As such, the interpretation of running distance in isolation is an oversimplified quantification of a runner's training stress due to a failure to account for the athlete's psychobiological/physiological responses (ie, internal training loads) that are influenced by daily stress. ^{23,27,33} Because sRPE correlates with blood lactate concentration, it can be considered an individualized measure of intensity, and is often the most practical and preferred means to quantify internal training load. ^{37,38} Nevertheless, coupling external (eg, distance, pace, power, cumulative impact)

TABLE 2

maximum

mmol/L Training loads, AU

Duration × RPE

(/1000)

Estimated blood lactate.

Accumulated GRF × RPE

Accumulated ATF × RPE

and internal (eg, sRPE, heart rate, blood lactate) metrics to quantify training load (TABLE 1) provides an even more complete quantification of training stress. 16,18,23,24,33

Because it is challenging to prescribe training loads due to session-to-session variability of the internal load response of an athlete, weekly running volume is commonly used to prescribe training, as it is specific and easily understood. Coaches can qualitatively prescribe intended internal load with instructions like "easy" or "hard effort" or "submaximal effort," or even use an accepted rating of perceived

exertion descriptor ("somewhat hard"). However, without monitoring the internal loads experienced by a runner, it is difficult to quantify the overall training response. Thus, training loads, including external load and internal physiological load, are valuable to quantify and monitor running training over time to truly understand the overall training stress.

Regardless of the specific variable used by practitioners, comparisons of current training stress (ie, acute stress/ fatigue) relative to training stress in previous training cycles (ie, chronic stress or accumulated fitness) are also critical to understanding training adaptation.^{2,7} The concept of quantifying current fatigue (acute) compared to accumulated fitness (chronic) was proposed over 40 years ago7 but has been popularized more recently with the acute-chronic workload ratio (here, "workload" is synonymous with "load"). Despite the current disagreements and concerns regarding its use to predict or avoid athletic injuries,26 this ratio can be used to quantify current fatigue relative to accumulated fitness or fatigue of any training metric. Regardless of its ability, or inability, to predict injury risks, comparing acute training load relative to chronic training load may help explain the acute physiological effects of current training stress relative to fitness. Thus, monitoring training stress using a ratio of acute stress to fitness may also help improve training outcomes,16 although it is critical to conduct research to validate this approach to monitoring training response. Future research should examine how different external and internal training load metrics that seek more specificity (eg, surface specific and/or intensity specific) can be used to quantify training stress in distance runners, and how these metrics relate to training adaptation, fatigue, injury risk, and/or performance outcomes.

On Soft Trail in Typical Supportive Running Shoes 10-km Recovery Run 10-km Recovery Run Ten 1-km Track Repeats **Parameter** (Fresh) (Very Tired) in Rigid Spikes External loads^a Duration (volume), min:s 37:30 43:20 27:30 3:45 4:20 2:45 Pace, min:s/km 177^b Cadence, steps/min 180 1989 6750 Estimated steps, n 7669 5445 Estimated peak vGRF, BWd 3.1 2.9 3.3 Estimated accumulated 20925 22240 17969 vGRF. BW Estimated peak ATF, BWe 10.0 9.1 11.5 67500 70970 62618 Estimated accumulated ATF, BW Internal loads 9 2 5 RPE (1-10) Estimated heart rate, % 70 80 95

Hypothetical Scenarios of 10-km

RUNS WITH ESTIMATED LOADS

4.5

217

111

355

>10

248

162

564

Abbreviations: ATF, Achilles tendon force; AU, arbitrary unit; BW, body weight; GRF, ground reaction force; RPE, rating of perceived exertion; vGRF, vertical ground reaction force.

2.5

75

42

135

Emerging Moderating Factors of Running Training Loads

A promising area of emerging research to quantify training loads may be the sup-

 $^{{}^{\}mathtt{a}} Metrics\ were\ estimated\ from\ published\ biomechanical\ data.$

 $^{^{\}mathrm{b}}Data\,from\,Chan$ -Roper et al $^{\mathrm{g}}$ (ie, approximately 1.7% lower cadence with fatigue).

^cData from Hanley and Bissas²¹ (ie, cadence of athletes during the 10000-m World Championship race).

^dData from Arampatzis et al¹ (ie, estimated peak vGRF at different running speeds).

 $^{^{\}circ}$ Data from Dorn et al. 13 Estimated muscle forces of the gastrocnemius and soleus were summed to estimate the peak ATF. The peak forces for each tested speed were used to construct a regression to estimate the peak ATF at the speeds presented in this table.

planting of conventional metrics of external and internal training loads^{20,31,34} (TABLE 2) with biomechanical metrics, which could improve estimates of training stress in runners. These biomechanical metrics could act as moderating factors (effect-measure modifiers) to external and internal loads and influence the strength of their relationship with training load metrics. Compared with team sports and other endurance sports (eg, cycling and swimming), distance running involves variable running surfaces (eg, road versus trail versus track), often over undulating terrain (eg, hills versus flat), with constant changes in footwear or foot-strike pattern depending on workout or competitive needs (eg, spikes during track sessions versus cushioned shoes during trail-based endurance runs). The distribution and magnitudes of muscle, tendon, bone, and articular forces are influenced greatly by these different running conditions. Coupling quantification of these internal forces with the more traditional metrics of internal and external training loads is becoming feasible with recent technological advances.

The emergence of both commercial and research-grade wearable technology (eg, inertial measurement units) presents the opportunity for continuous monitoring (step by step) of biomechanical factors during running. Wearable sensors can quantify various biomechanical data such as tibial shock, foot-strike angle, ground contact time, and leg stiffness, among others, 12,33,41 to enable a more precise quantification of training stress. Incorporating biomechanical data from wearable devices will give greater depth of knowledge about how running mechanics change in different environments, fatigue states, types of footwear, and running surfaces, and over the course of a training program. 33,36

Substantial research is required to determine best practices and validity for the integration of biomechanical data into running training quantification. First, it is currently unclear which biomechanical variable(s) might be the most useful in the monitoring of runners. For example, incorporating the cumulative peak vertical ground reaction force experienced by runners during training sessions may improve the predictive ability of running injury epidemiological studies that have previously relied almost exclusively on (1) a single baseline biomechanical analysis and (2) running volume during training periods. However, ground reaction force is a global load experienced by the runner and provides little insight into specific anatomical loads (eg, Achilles tendon force). Second, best practices for classifying training loads derived from biomechanical data are unknown. For instance, determining whether analyzing biomechanical data continuously or categorically (eg, high, low, medium resultant tibial shock magnitude bins)4 enhances predictive abilities of biomechanical data is presently unknown. Last, the appropriate weighting of biomechanical metrics against other training load metrics has not yet been determined. Namely, it is unclear whether a biomechanical metric should be weighted equally with running volume and sRPE (ie, total number of steps times biomechanical metric magnitude times sRPE) when estimating total training stress (hypothetical examples in TABLE 2). These 3 unknowns will require substantial research prior to widespread adoption and use of these data by coaches and clinicians.

Running Training Monitoring and Running-Related Injuries

It is important to consider the multitude of factors that might cause a running-related injury. A recently proposed framework for running-related injury etiology highlights the importance of evaluating the difference between (1) the cumulative loads applied to specific anatomical structures during a running session, and (2) the load capacity of specific anatomical structures that can be modified during a running session.³ Specifically, a running-related injury occurs when the structure-specific cumulative load of a running session exceeds the structure-

specific load capacity. Although it has become increasingly feasible to measure cumulative external loads experienced during a running session via wearable technology (see TABLE 2), it is challenging to accurately assess structure-specific internal tissue loads and tissue capacity experienced by the musculoskeletal system. Importantly, these frameworks for running-related injury etiology also need to be applied to individual athlete differences in load capacity (eg, bone density, bone strength, and tendon stiffness), which certainly will also influence model predictive outcomes for running-related injury development. Given the complexity of structure-specific load capacity, it is not surprising that running distance alone is an insufficient guide when prescribing training programs to prevent running-related injury.6,35 The relationship between cumulative load and cumulative tissue (eg, bone) damage is not linear. Thus, cumulative damage measures may be more advantageous than cumulative load when assessing injury risk in runners.14

Considering the relationship between applied loads and resultant tissue damage derived from material testing models will better inform algorithms used to determine structure-specific tissue loads and damage from external loads. For example, Kiernan and colleagues28 used a waist-mounted accelerometer to estimate the peak vertical ground reaction force experienced during running training sessions. Summing the peak vertical ground reaction force per foot strike across a training session and modeling tissue susceptibility to damage from applied loads derived from material testing research14 produced a metric of cumulative "damage" per training session. Runners who experienced injuries had greater cumulative peak vertical ground reaction force across a competitive season compared with runners who finished the season injury free. Such new methods and findings are intriguing but require verification in larger and different populations of runners before these metrics can be

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implemented in daily monitoring to help reduce risk of running-related injury.

Furthermore, the use of external load metrics (eg, ground reaction forces) as a surrogate for internal tissue loads (eg, tibial bone forces) may be misguided. The peak vertical ground reaction force is responsible for only 20% to 30% of peak tibial bone force during running, whereas muscle forces are the largest contributor.29 Nevertheless, these data suggest that coupling biomechanics obtained from wearable devices with estimates of tissue damage may hold promise for identifying runners who are at risk of experiencing a running-related injury, and for enhanced characterization of peripheral (eg, muscle, tendon, and bone) training stress. In time, wearable devices may provide tissue-level estimates of training loads, provided that the ability of wearable devices to estimate running biomechanics improves. Some commercially available wearable devices provide acceptable estimates of temporospatial metrics, tibial shock, and peak vertical ground reaction force during running, but others still lack the acceptable criterion validity that is necessary prior to considering their use in injury prediction models.32 Thus, researchers and clinicians are currently limited to estimating external training loads applied to the whole runner rather than at the tissue level. Although training load likely contributes to the development of a runningrelated injury, overuse injuries in runners are multifactorial. It remains to be seen whether the combination of external load (eg, distance, duration, steps, ground reaction forces), physiological internal load (eg, sRPE), and internal tissue load (eg, stress, strain, stiffness), and adaptation to these loads, will improve our ability to accurately predict injury.

Moving Forward

Training loads likely play a major role in causing running-related injury and facilitating optimal training adaptations. However, there is inconclusive evidence regarding the influence of running training loads and training errors on running injury development.¹⁰ The absence of evidence might be because most studies use running distance as the sole measure of training load. We argue that this approach does not adequately quantify the training stress experienced by runners. Refined approaches for better and safer recommendations for progressing running training are needed.

Future prospective research on running-related injury should appropriately quantify and report training loads. This can be as simple as minutes run per session multiplied by sRPE, which does not require sophisticated measuring devices. We believe the future of training monitoring should emphasize biomechanical external load metrics12 coupled with internal (ie, physiological/psychological) load metrics. Even with the best monitoring approaches, differences in an individual runner's tissue load capacity will always make injury prediction elusive. Though it may be difficult to change the running culture's obsession with weekly distance, more advanced methods for quantifying running training may improve running training monitoring. Once advanced methods are developed, educating clinicians and coaches will be key to ensuring that these tools and approaches are used effectively to improve injury risk reduction and, ultimately, performance.

STUDY DETAILS

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DATA SHARING: There are no data in this manuscript.

PATIENT AND PUBLIC INVOLVEMENT: There were no patients involved in the research.

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